Barry J. Cadden and New England Compounding Center-Notice of Resolution of Complaint Committee: dated—10/27/1999.



## Commonwealth of Massachusetts

## Division of Registration

239 Causeway Street · Boston, Massachusetts 02114
www.state.ma.us/reg

## COMMONWEALTH OF MASSACHUSETTS BOARD OF REGISTRATION IN PHARMACY NOTICE OF RESOLUTION OF COMPLAINT COMMITTEE

To: Barry J. Cadden, R.Ph.

In the Matter of: Barry J. Cadden, R.Ph., Pharmacist Registration No. 21239 ("Registrant") and New England Compounding Center of Waverly Street, Framingham, Massachusetts, Permit No 2848.

The Board of Registration in Pharmacy received a complaint from a Board Agent alleging that a pharmacist, Barry J. Cadden, R.Ph., License No. 21239 ("Registrant") and New England Compounding Center provided a practitioner with prescription blanks which referred to the New England Compounding Center, in violation of Board Regulations at 247 CMR § 9.01 (13) and 9.01 (1).

The Board Complaint Committee reviewed the complaint on Tuesday, October 19, 1999 including investigative material submitted by the Agent of the Board. The Board voted to issue an Informal Reprimand to Registrant and New England Compounding Center.

This decision is not considered formal action. The complaint and any materials generated as a result of the investigation of the complaint will remain on file with the Board as it is a matter of public record.

Hardle D. Sparr

Harold Sparr, R.Ph., President Board of Registration in Pharmacy

c: Complainant

Certified Mail Number: z 049 085 540

Dated: October 27, 1999

Complaint Information			02/10/2004	
Case No: 19990330PH06	66 Board Code: F	PH License No: 0000212	39 Type:	- -
Case Status: CL	· .	Inv Initials: JDC		
Case Priority: 2		Office Assigned: BO		
Nature of Complaint: UP	:	Office Assigned.		
Licensee Name:	BARRY	J CADDEN		
. Address:				
Telephone Number	6175551212			
Business Name:			* . <b>.</b>	
Líc SSN:		1	· . •	
Complainant		BD OF PHARMAC	· · · · · · · · · · · · · · · · · · ·	-
Address:	)		- · · · · · · · · · · · · · · · · · · ·	
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		MA 02202 - 0000	•	
Day Phone No:	6175551212	Home Phone No: 617555	1212	
		3274		
Description of Complaint:				
ALLEGED VIOLATION CMR	SECTION 9.01 (13			
	-			* * * * * * * * * * * * * * * * * * * *
Comp Interview		Informal Conf Date:		
Date: Inv Recommend:		Complaint Withdrawn Date:		
Inv Close Date: 09/2	8/1999	Pending Date:		
Fine Assessed: 0		Hearing Date:		
Fine Received: 0		Hearing Type:		
Bd Decision: DS		Refund:	0	
Bd Close Date: 12/1	0/1999	Consent Agreement Date:		
Location:		Subject		

At Information

02/10/2004

∡osing Remark:

CASE DISMISSED - INFORMAL REPRIMAND ISSUED FOR SUPPLYING PRESCRIPTION BLANKS TO PRACTITIONER.